

WHAT IS CLAIMED IS:

1. A method for treating, controlling, ameliorating or reducing the risk of a movement disorder in a patient in need thereof that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a histamine H3 antagonist, or a pharmaceutically acceptable salt thereof.
2. A method for treating, controlling, ameliorating or reducing the risk of tremor in a patient in need thereof that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a pharmaceutically acceptable salt thereof.
3. The method of Claim 2 wherein the histamine H3 inverse agonist is a selective inverse agonist of the histamine H3 receptor.
4. The method of Claim 2 wherein the tremor is selected from the group consisting of essential tremor, tremor associated with Parkinson's disease, tremor associated with cranofacial trauma, tremor associated with multiple sclerosis, tremor associated with stroke, tremor associated with dystonia, neuropathic induced tremor, toxic induced tremor and drug induced tremor.
5. The method of Claim 4 wherein the tremor is essential tremor.
6. A method for treating, controlling, ameliorating or reducing the risk of tremor in a patient in need thereof that comprises administering to the patient a therapeutically effective amount of a histamine H3 antagonist or a pharmaceutically acceptable salt thereof.
7. The method of Claim 6 wherein the histamine H3 antagonist is a selective antagonist of the histamine H3 receptor.
8. The method of Claim 6 wherein the tremor is selected from the group consisting of essential tremor, tremor associated with Parkinson's disease, tremor associated with cranofacial trauma, tremor associated with multiple sclerosis, tremor associated with stroke, tremor associated with dystonia, neuropathic induced tremor, toxic induced tremor and drug induced tremor.
9. The method of Claim 8 wherein the tremor is essential tremor.

10. A method for treating, controlling, ameliorating or reducing the risk of an akinetic-rigid disorder in a patient in need thereof, that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a histamine H3 antagonist, or a pharmaceutically acceptable salt thereof, and an amount of an antiparkinsonian agent, such that together they give effective relief.

11. A method for treating, controlling, ameliorating or reducing the risk of a dyskinesia in a patient in need thereof, that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a histamine H3 antagonist, or a pharmaceutically acceptable salt thereof, and an amount of a neuroleptic agent, such that together they give effective relief.

12. The method of any one of Claim 1-11 wherein the histamine H3 inverse agonist or the histamine H3 antagonist, or a pharmaceutically acceptable salt thereof, is administered in combination with an agent selected from the group consisting of: levodopa, levodopa with a selective extracerebral decarboxylase inhibitor, carbidopa, entacapone, an anticholinergic, a COMT inhibitor, an A2a adenosine receptor antagonist, a cholinergic agonist, a dopamine agonist, a butyrophenone neuroleptic agent, a diphenylbutylpiperidine neuroleptic agent, a heterocyclic dibenzazepine neuroleptic agent, a indolone neuroleptic agent, a phenothiazine neuroleptic agent, a thioxanthene neuroleptic agent, an NMDA receptor antagonist, a metabotropic glutamate receptor potentiator and a metabotropic glutamate receptor agonist.

13. The method of any one of Claim 1-11 wherein the histamine H3 inverse agonist or the histamine H3 antagonist, or a pharmaceutically acceptable salt thereof, is administered in combination with a compound selected from the group consisting of: acetophenazine, alantemol, benzhexol, bromocriptine, biperiden, chlorpromazine, chlorprothixene, clonazepam, clozapine, diazepam, ethanol, fenoldopam, fluphenazine, gabapentin, haloperidol, levodopa, levodopa with benserazide, levodopa with carbidopa, lisuride, loxapine, mesoridazine, molindolone, naxagolide, olanzapine, pergolide, perphenazine, pimozide, pramipexole, primidone, propranolol, risperidone, sulpiride, tetrabenazine, trihexyphenidyl, thioridazine, thiothixene and trifluoperazine, or is administered following surgery.

14. A method for treating, controlling, ameliorating or reducing the risk of an akinetic-rigid disorder in a patient in need thereof who is non-responsive to antiparkinsonian agents or for

whom antiparkinsonian agents are contraindicated, that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a histamine H3 antagonist, or a pharmaceutically acceptable salt thereof.

- 5 15. A method for treating, controlling, ameliorating or reducing the risk of a dyskinesia in a patient in need thereof who is non-responsive to neuroleptic agents or for whom neuroleptic agents are contraindicated, that comprises administering to the patient a therapeutically effective amount of a histamine H3 inverse agonist or a histamine H3 antagonist, or a pharmaceutically acceptable salt thereof.

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